

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	:	Mattias HÄLLBRINK et al.)	Examiner:	HY
)	Unknown	
Serial No.	:	10/517,079)	Art Unit:	
)	Unknown	
Filed	:	June 18, 2003)		
)		
Cnfrm. No.	:	8542)		
)		
For	:	CELL PENETRATING PEPTIDES)		
)		

RESPONSE TO THE NOTIFICATION OF MISSING REQUIREMENTS
UNDER 35 U.S.C. § 371

Mail Stop PCT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Notification of Missing Requirements Under 35 U.S.C. § 371 (mailed May 17, 2005), applicants submit herewith the following items:

- (i) two, substitute *compact disc* copies (labeled as “Copy #1” and “Copy #2”) of the Sequence Listing originally submitted in the present application in computer readable form on December 6, 2004, in compliance with 37 C.F.R. § 1.821(g);
- (ii) Statements in Accordance with 37 C.F.R. § 1.821; and
- (iii) fully executed Combined Declaration and Power of Attorney forms for all of the inventors, in compliance with 37 C.F.R. §§ 1.497(a) and (b).

Applicants have also submitted herewith a Supplemental Preliminary Amendment, directing entry of the substitute compact disc copies of the Sequence Listing into the present application.

If any additional fees are due in regard to the Notification of Missing Requirements Under 35 U.S.C. § 371, the Commissioner is hereby authorized to charge any such fees to Deposit Account No. 14-1138.

In view of all of the foregoing, applicants submit that this case is complete and ready for examination by the U.S. Patent and Trademark Office, and such examination is earnestly solicited.

Respectfully submitted,



Andrew K. Gonsalves
Registration No. 48,145

Date: August 9, 2005
NIXON PEABODY LLP
Clinton Square, P.O. Box 31051
Rochester, New York 14603-1051
Telephone: (585) 263-1658
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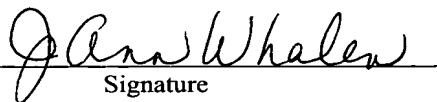
CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]

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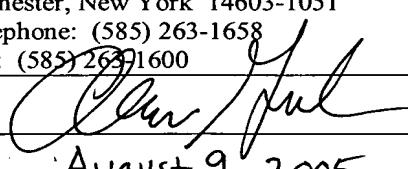
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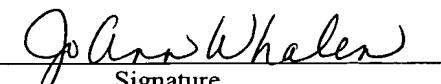
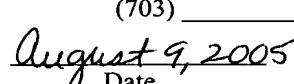

Signature

Jo Ann Whalen
Type or Print Name

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/517,079
		Filing Date	June 18, 2003
		First Named Inventor	Mattias Hällbrink <i>[Signature]</i>
		Group Art Unit	Unknown
		Examiner Name	Unknown
Total Number of Pages in This Submission	45	Attorney Docket Number	20747/230 (OREZ/P29765US)

ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Supplemental Preliminary Amendment (3 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (\$120.00) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement (\$____) <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Notification of Missing Requirements Under 35 U.S.C. 371 (2 pages) <input checked="" type="checkbox"/> A copy of the Notification of Missing Requirements Under 35 U.S.C. 371 (2 pages)	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input checked="" type="checkbox"/> Seven Declaration and Power of Attorney forms (35 pages) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition (\$____) <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer (\$____) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (\$____) (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input checked="" type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Check in the amount of \$120.00 <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statements in Accordance with 37 C.F.R. § 1.821 (1 page) Two (2) compact disc copies (labeled "Copy #1" and "Copy #2") of the Sequence Listing (37 CFR 1.821(g))	
		Remarks	
		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 14-11138 for the above identified docket number.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Andrew K. Gonsalves Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1658 Fax: (585) 263-1600	
Signature	 Registration No. 48,145	
Date	August 9, 2005	

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<input type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) _____.		
 Jo Ann Whalen Signature Jo Ann Whalen Typed or printed name		
 Date August 9, 2005		